FORM D

SEC 1972 (6-02)

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UNITED STATES SECURITIES AND EXCHANGE CO Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

1 of 8

OMB Number: Expires: April 30, 2008 Estimated average burden hours per response. 16.00



Name of Offering (check if this is an amendment and name has changed, and indicate c TIGERS Revenue-Weighted Mid Cap Index Fund I, LP	change.)
Filing Under (Check box(es) that apply):	6 Section 4(6) ULOE
A. BASIC IDENTIFICATION	DATA
Enter the information requested about the issuer	,
Name of Issuer (check if this is an amendment and name has changed, and indicate cl	hange.)
TIGERS Revenue-Weighted Mid Cap Index Fund I, LP Address of Executive Officers (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2005 Market Street, Philadelphia, PA 19103	(215) 854-8181
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) As above	Telephone Number (Including Area Code) As above
Brief Description of Business	PROCESSED
Partnership investing primarily in securities underlying a benchmark index.	111002025
Type of Business Organization corporation limited partnership, already formed other (p	please specify): FEB 2 2 2007
Actual or Estimated Date of Incorporation or Organization Month Year Actual or Estimated Date of Incorporation or Organization 1 2 0 6 X A (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other for	Actual Estimated FINANCIAL reign jurisdiction)
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under U.S.C. 77d(6).	1
When To File: A notice must be filed no later than 15 days after the first sale of securities in the Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address give it is: due, on the date it was mailed by United States registered or certified mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.	D.C. 20549
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must photocopies of the manually signed copy or bear typed or printed signatures.	be manually signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need thereto, the information requested in Part C, and any material changes from the information previous be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemptio adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separation of the payment of a fee as a precamount shall accompany this form. This notice shall be filed in the appropriate states in constitutes a part of this notice and must be completed.	arate notice with the Securities Administrator in each state condition to the claim for the exemption, a fee in the proper
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the fappropriate federal notice will not result in a loss of an available state exemptiling of a federal notice.	rederal exemption. Conversely, failure to file the tion unless such exemption is predicated on the

Persons who respond to the collection of information contained in this form are not

required to respond unless the form displays a currently valid OMB control number.

,	A. BASIC IDE	NTIFICATION DATA	-		Ĭ.
2. Enter the information requested for the	e following:				
• Each promoter of the issuer, if the Each beneficial owner having the	issuer has been organized with	nin the past five years;	of 10% or mor	a of a aloce of aquity caousi	ities of the
issuer:	power to vote or dispose, or di	rect the vote of disposition	101, 1076 01 11101	e of a class of equity securi	ities of the
Each executive officer and director	or of corporate issuers and of co	orporate general and manag	ging partners of	partnership issuers; and	
• Each general and managing partner	<u> </u>		T Dimension	M. Garandan Han	
Check Box(es) that Apply: Promote	er Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)				Trianaging 1 at the	
The Tigers Revenue One, LLC					
Business or Residence Address (Number	and Street, City, State, Zip Co	de)			
2005 Market Street, Philadelphia	PA 19103				Ŋ
Check Box(es) that Apply: Promote		Executive Officer	Director	General and/or	<u> </u>
	_	_	–	Managing Partner	
Full Name (Last name first, if individual)					+ it
					;
Business or Residence Address (Number	and Street, City, State, Zip Co	de)			
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Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	Director	General and/or	
Chesh Box(es) that rippi).				Managing Partner	ı
Full Name (Last name first, if individual)					
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Business or Residence Address (Number	and Street, City, State, Zin Co	de)	· · · · · · · · · · · · · · · · · · ·		
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Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	Director	General and/or	
Check Box(es) that Apply.	i Deliencial Owlier	Executive Officer	Director	Managing Partner	ì
Full Name (Last name first, if individual)				8 8	<u> </u>
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Business or Residence Address (Number	and Street City State Zin Co	de)	· —— · · · · · · · · · · · · · · · · ·		•
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Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	Director	General and/or	
Check Box(es) that Apply: Promote	denencial Owner	Executive Officer	Director	Managing Partner	-
Full Name (Last name first, if individual)					
Business or Residence Address (Number	and Street, City, State, Zip Co	de)			
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Check Box(es) that Apply:	er Beneficial Owner	☐ Executive Officer	Director	General and/or	
Check Box(es) that Apply.	□ Belleticial Owlier	L'EXECUTIVE OTTICES	Director	Managing Partner	4
Full Name (Last name first, if individual)					· .
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Business or Residence Address (Number	and Street City State 7in Co	dal			
Dusiness of Residence Address (Number	and Street, Oity, State, Zip Co	dc)			, â
	CIB 6:10		<u> </u>		
Check Box(es) that Apply: Promote	er Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if individual)					
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Business or Residence Address (Number	and Street, City, State, Zip Co	ae)			
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			İ	В. 1	INFORMAT	FION ABOU	JT OFFERI	NG				,]
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											Yes	No No
•			Answ	er also in Ap	pendix, Col	umn 2, if fili	ng under UL	OE.				
2. What	is the minin	num investm	ent that will	be accepted	from any ind	lividual?	•••••				\$ <u>500,000</u>	<u>o</u>
											Yes	No
3. Does the offering permit joint ownership of a single unit?											\boxtimes	
comn If a p or sta a brol	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Not applicable. Full Name (Last Name first, if individual)											
Full Nar	ne (Last Nar	ne iirst, ii in	aividuai)									:
Business	or Residen	ce Address (i	Number and	Street, City,	State, Zip C	ode)						1
Namie of	Name of Associated Broker or Dealer											
States in	Which Pers	on Listed Ha	s Solicited o	r Intends to	Solicit Purch	asers	-			* -		
(Chec	k "All State	s" or check i	ndividual St	ates)		•••••	•••••				☐ All S	States
AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	ID
	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT'	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Nar	ne (Last Nar	ne first, if in	dividual)									
Business	or Residen	ce Address (Number and	Street, City,	State, Zip C	ode)						
Name of	Associated	Broker or D	ealer [
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(Che	k "All State	s" or check i	ndividual St	ates)							☐ All S	States
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IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
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RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full Nar	ne (Last Nar	ne first, if in	dividual)									
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Name of	Associated	Broker or D	ealer									1
States in	Which Pers	on Listed Ha	s Solicited o	r Intends to	Solicit Purch	nasers						
(Che	ck "All State	s" or check i	ndividual St	ates)							☐ All S	States
A.L	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	ID
11.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Proceeds a consistence of a consistence included in this official and	ad the total amount already.		•
1. Enter the aggregate offering price of securities included in this offering a sold. Enter "0" if answer is "none" or "zero." If the transaction is an explox and indicate in the columns below the amounts of the securities.	change offering, check this		•
and already exchanged.	Aggregata	A	nume Almondus
Toma of Consumity	Aggregate Offering Price		ount Already fold
Type of Security Debt		s	
Equity	\	°	0
Equity	\$ <u> 0 </u>	ъ <u></u>	U
Common Preferred	·		i
Convertible Securities (including warrants)	\$ 0	\$	0
Partnership Interests		\$	0
Other (Specify)		<u> </u>	0
Total		<u>s</u>	0
Answer also in Appendix, Column 3, if filing under ULO		~	
Allswer also in Appendix, Column 5, it fitting under OLO	L.		
2. Enter the number of accredited and non-accredited investors who have offering and the aggregate dollar amounts of their purchases. For offering the number of persons who have purchased securities and the aggreg purchases on the total lines. Enter "0" if answer is "none" or "zero."	gs under Rule 504, indicate	As	ggregate
	Number Investors	Doll	ar Amount · Purchases
Accredited Investors	n*	\$	0 '
Non-accredited Investors		ς	0
Total (for filings under Rule 504 only)		· ·	N/A
Answer also in Appendix, Column 4, if filing under ULOE.	*No purchases	Ψ	
Allswei also in Appendix, Column 4, it iming and i Obob.	have occurred		
3. If this filing is for an offering under Rule 504 or 505, enter the information sold by the issuer, to date, in offerings of the types indicated, in the twel first sale of securities in this offering. Classify securities by type listed in	ve (12) months prior to the		
	Type of	Doll	ar Amount
Type of offering	Security		Sold ·
Rule 505	<u>N/A</u>	\$	N/A
Regulation A	N/A	\$	N/A
Rule 504		\$	N/A
Total		\$	N/A
!		*—	
4. a. Furnish a statement of all expenses in connection with the issua securities in this offering. Exclude amounts relating solely to organiza The information may be given as subject to future contingencies. If the is not known, furnish an estimate and check the box to the left of the estimate.	tion expenses of the issuer. e amount of an expenditure		
Transfer Agent's Fees		ç	0 '
Printing and Engraving Costs		\$ \$	5,000
Legal Fees	 -	\$	95,000
Accounting Fees	<u> </u>	\$	0
Engineering Fees		s	0
Sales Commissions (specify finders' fees separately)		\$	0
Other Expenses (identify)		\$	0
m . 1	57	•	100 000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Tribate to the first property of the property	S AIV	USE OF PROCE	EDS
b. Enter the difference between the aggregate offering price given in response to P. Question 1 and total expenses furnished in response to Part C - Question 4.a. This differ the "adjusted gross proceeds to the issuer."	rence is		<u>\$499,900,000</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or propose used for each of the purposes shown. If the amount for any purpose is not known, fur estimate and check the box to the left of the estimate. The total of the payments liste equal the adjusted gross proceeds to the issuer set forth in response to Part C — Quest above.	mish an ed must		
		Payments to Officers, Directors, & Affiliates	Payments to
		• ^	Others
Salaries and fees Purchase of real estate		\$ 0	□ \$ <u>0</u> □ \$ 0
Purchase of real estate	Ц	<u> </u>	
and equipment.		s 0	r⊓s o
Construction or leasing of plant buildings and facilities			□ \$ <u> </u>
Acquisition of other businesses (including the value of securities involved in this offer		\$ <u>/</u>	
that may be used in exchange for the assets or securities of another issuer pursuant to		•	•
merger)		\$0	□ \$ <u>0</u>
Repayment of indebtedness		s 0	S 0
Working capital		s 0	□ \$ <u>0</u>
Other (specify):			
Partnership investing primarily in securities underlying a benchmark index	🗆	<u>\$</u>	⊠ <u>Up to</u>
			\$500,000,000
Columns Totals	🗆	\$ <u>.</u> 0	⊠ <u>Up to</u> \$500,000,000
Total Payments Listed (column totals added)	••••••	<i>;</i>	☑ <u>Up to</u> \$500,000,000
AND THE PROPERTY OF THE PROPER	9 (14) 14 (14)	To the transference	1966年(中華日本語)。 1966年(中華日本語)
D FEDERAL SIGNATURE	l nerson	If this notice is	filed under Rule 505
The iccuer has duly caused this notice to be signed by the undersigned duly authorized	poidoin.	change Commissi	on, upon written request
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities	es and Ex paragraph	i (b)(2) of Kule 50	
The issuer has duly caused this notice to be signed by the undersigned duly authorized following signature constitutes an undertaking by the issuer to furnish to the U.S. Securitie its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant to pursuant (Print or Type) Signature	paragraph		Date ,
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant	paragraph		
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant	paragraph		Date ,
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following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant to pursuant to pursuant to pursuant to pursuant or Type) FIGERS Revenue-Weighted Mid Cap Index Fund I, LP Name of Signer (Print or Type) Title of Signer (Print of Type)	paragraph		Date ,
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant	paragraph		Date ,
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant	paragraph		Date ,
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursuant to pursuant	paragraph		Date ,

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, 1. Is any party described in 17 CFR rule?	230,252(c), (d), (e) or (f)	presently subject to any of the disqualification provisions of such	Yes No
	See Appendix, Co	olumn 5, for state response.	
The undersigned issuer hereby u D (17 CFR 239.500) at such time		y state administrator of any state in which this notice is filed, a notice	on Form
3. The undersigned issuer hereby u to offerees.	ndertakes to furnish to the	e state administrators, upon written request, information furnished by	the issuer
The undersigned issuer represent Offering Exemption (ULOE) of exemption has the burden of estatements.	the state in which this not	r with the conditions that must be satisfied to be entitled to the Uniform ice is filed and understands that the issuer claiming the availability of ions have been satisfied.	orm limited f this
The issuer has read this notification and duly authorized person.	d knows the contents to be	e true and has duly caused this notice to be signed on its behalf by th	e undersigned
:		0/	1
Issuer (Print or Type) TIGERS Revenue-Weighted Mid Ca	m Index Fund I. I.P	Signature Date	15/2001
Name (Print or Type)	<i>l</i>	Pitle (Print or Type)	i
Vincent T. Lowry		Authorized Signatory	1

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Inten-	d to sell accredited rs in State 3-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)				
State	Yes	No	l i	ited Partnerships nterests (Up to \$500,000,000)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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APPENDIX

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	to non-a	d to sell accredited is in State d-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)				
State	Yes	No	I	nited Partnership interests (Up to \$500,000,000)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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